



STATE OF WASHINGTON
WASHINGTON STATE BOARD OF HEALTH
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March 7, 2001

TO: Washington State Board of Health Members

FROM: Craig McLaughlin, Senior Health Policy Manager

RE: Mid-Session Report on Monitoring Legislation and Communicating with the Legislature

Background and Summary:

Between January 8, 2001, the first day of session, and March 5, 2001, the final day for committees to report out bills, the State Board of Health staff tracked 45 bills and reviewed perhaps twice that number to see if they should be tracked. During that period, the Board sent 20 letters commenting on 28 pieces of legislation. Board members twice addressed legislative committees and staff members testified a half dozen times. These communications with the Legislature raised awareness of the Board's recent work, advanced board issues, and were well received in most instances but some communications provoked criticism.

All staff activities were consistent with SBOH Policy 2001-001, which the Board approved with minor revisions in January. The policy worked well, although it is written in a way that presupposes Board opposition to measures. The policy mentions legislation that "conflicts with the Board's existing authority" or "contains a policy or programmatic change that runs counter to the Board's intent or direction." In practice, the staff and Board members have more often found themselves supporting legislation that would advance the Board's intent or direction. This was in part a response to the chair of the Senate Health and Long-Term Care Committee who encouraged the Board weigh in on issues related to its work.

Recommended Board Action:

None.

Discussion:

Staff members identified bills for review and monitoring in several ways:

- Committee staffers, members of the Legislature, and Department of Health managers alerted Board staff members to relevant legislation.

- Staff members reviewed the weekly calendars for the full Legislature and for key committees.
- Either the Executive Director or the Senior Health Policy Manager attended DOH Bill Review meetings each Tuesday and Friday.
- The Senior Health Policy Manager tracked bill movement, bill introductions by subject area, and the activities of key committees using the LegLink on-line information system.
- Staff members devoted a significant portion of the Thursday morning staff meetings to an in-house bill review.

In accordance with Policy 2001-001, these monitoring efforts sought to identify any legislation that had a direct impact on the Board's statutory powers and duties or was directly related to one of the board's priority areas. When staff members identified a bill of interest, they contacted appropriate members of the board by e-mail, often with a recommendation for action. In most cases, the recommendation was to send a letter drafted by staff. In a few instances, the staff recommended testifying at a hearing or signing in and being available to testify if asked.

Staff members adhered to Board Policy 2001-001. They contacted Linda Lake in all instances when legislation would have a direct impact on existing Board authority. When legislation was related to a Board priority area, they contacted Linda and the appropriate Board sponsor or sponsors. No action was taken by staff without first obtaining a go-ahead from a Board member.

When a bill had a specific impact on the Board's duties, or when a bill related to a Board priority area and a member expressed interest in taking action, the Senior Health Policy Manager posted information on the Bill Watch section of the Board's Web site. The format complied with Board Policy 2001-001.

Between January 8, 2001, and May 5, 2001, the Board sent 20 letters commenting on 28 pieces of legislation. Many letters addressed two companion bills, but some simultaneously addressed distinct but closely related pieces of legislation. Copies of these letters are available on the Bill Watch section of the Board's Web page. Some letters were sent under the signature of Linda Lake in her official capacity as Board Chair. Others went out under the signature of individual Board members. For example, several letters commenting on bills related to environmental health went out under Carl Osaki's signature.

Two members of the Board provided testimony before the Legislature. On January 15, 2001, Linda Lake presented "A New Public Health Vision for the New Century" before the Senate Health & Long-Term Care Committee. On January 18, 2001, Joe Finkbonner testified at the request of the House Health Care Committee on health disparities and workforce diversity. His presentation was part of a work session on health-care workforce shortages.

In addition, staff members testified on bills related to "reach-back" programs to increase the number of students of color in the pipeline, in-school administration of sealants by dental hygienists, various genetics bills, lead education, and prescription drugs.

Only a few of the bills would have a direct impact on the Board's authority and responsibility. One bill would exempt workers at adult family homes from having to obtain food handler permits. Another would add a SBOH member to a committee to study the delivery of support services for people with AIDS. A third would set up a committee to study the state's food service regulations.

The majority of other bills related specifically to the board's work on access to critical health services or critical children's preventive services (e.g., breast and cervical cancer treatment, mental health coverage, and restricting minors access to tobacco), to genetic testing and privacy, to environmental health issues (e.g., lead education and pesticide applications in schools), and to health disparities.

There were both upsides and downsides to the Board's increased visibility before the Legislature. After Linda Lake's January 15, 2001, presentation, Senator Pat Thibodeau, chair of the Senate Health & Long-Term Care committee, encouraged the Board to be more involved in hearings. In several instances, staff members received feedback from members and legislative staffers that their letters and testimony were appreciated. Our subsequent communications educated members and committee staff about the work the Board has been doing in the past year.

However, the Board also received criticism because it often took a position of "support in concept." Traditionally, support in concept often has meant: We agree with where you are trying to go with this legislation but we are not sure it is the right vehicle. Support in concept is also a way to support the intent of legislation while steering clear of special interest battles when you're not prepared to take a position. In the Board's case, for example, it might have identified a need to provide greater access to a particular type of health services, but it might not have conducted a sunrise review that would allow it to give an informed opinion on whether expanding the scope of practice of a particular allied provider group is a safe and effective way to increase access.

This year, the governor's office recommended that agencies use support in concept to indicate their support for the concept behind a bill while stopping short of arguing that a bill with a significant price tag should receive funding. Following this advice, the Board sent several support in concept letters that noted that the Board was not taking a position on whether a particular bill should be funded in the current fiscal environment. We received feedback from the Senate Health & Long-Term Care Committee that these support in concept letters were not particularly constructive and the committee's minority leader, Senator Alex Deccio, publicly criticized a staff member who was giving support in concept testimony on a bill that would have allowed dental hygienists to administer sealants in schools.

While many of the bills that staff members are monitoring appear to have died in the committee, 19 had been referred out with a "do pass" recommendation as of March 5, 2001. Staff members will continue to monitor these bills throughout session and recommend action if appropriate.

I have attached two documents for your reference — a copy of the Bill Watch page from the SBOH Web site and a printout of the bills we are currently tracking through LegLink.

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